Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

	·												
		CLAIMS AS	S FILED - (Column		-	(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			25			· .		RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		* 14	* 5		X\$ 9=		OR	X\$18=	90	
INDEPENDENT CLAIMS) mi	inus 3 =	*	*		X43=	·	OR	. X86=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	ı	TOTAL		OR	TOTAL	860	
CLAIMS AS AMENDED - PART II							•			OTHER	THAN		
		(Column 1)		(Colun	nn 2) .	(Column 3)	_	SMALL	ENTITY	OR .	SMALL E	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT	-	HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**	· ·	= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AINA	=		X43=		OR	X86=		
ل ظ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								TOTAL		OR	TOTAL		
•	(0-1							ADDIT. FEE			ADDIT FEE		
		(Column 1) T CLAIMS		· (Colum I нідні		(Column 3)	1 6			. 1		1001	
AMENDMENT B	1 1 1	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER - DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**	••	=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CLAIM	=		X43=		ĢR	X86=		
Ш	FIRST PRESENTATION OF MI		THIFTE DE		. · ·		. [+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
	(Column 1)		(Colum		nn 2)	nn 2) (Column 3)		ADDIT. FEE L		,	ADDII. FEE		
AMENDMENT C	\ :	CLAIMS : REMAINING : AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		= .		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=	·	o'R	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR ,	ADDIT. FEE		
		nber Previously Paid					r fou	nd in the app	ropriate box	in col	umn 1,		